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R.I.P. Patti Redd – Uranium Poisoning

October 23, 2012



Patricia L. Redd, R.I.P.

When will Americans stop, listen, and rebel against this evil? Will we have to take it to the streets? Is that what it will take? I used to be proud to be an American. Today I am ashamed.

Our doctors tell us that we will most likely die of some type of cancer as a result of the uranium and tungsten poisoning that is just eating away at our organs.

What does it take for this to stop? Or, will it ever? This isn't an "oops." It's a crime.

Thank you for trying to make a difference. We only hope that your message will get through. Take this bull by the horns and do it. You have an audience and a lot of guts.

– Patti Redd to Christopher Bollyn, September 1, 2012

I have just learned that Patti Redd, the author of these words and subject of this story, has passed away. Patti had written to me about how she and her husband's health had suffered as a result of uranium and tungsten poisoning. She wanted others to understand the dangers of exposure. Patti and Richard Redd had worked for a company that disposed of contaminated military hardware by dumping it in the Pacific Ocean. The following is my posting of our most recent correspondence.

Patti maintained a blog entitled "Die with Dignity" at:

<http://diewithdignity.wordpress.com/>

About a year ago, an American woman who had worked as a civilian contractor for the U.S. military wrote to me about the severe health effects of being poisoned by uranium and tungsten contaminated hardware sent to U.S. territories in the Pacific Ocean for disposal in the ocean. As a civilian contractor, Patti Redd is able to talk about how she and her husband have suffered, something U.S. military personnel are not able to do. Patti's emails to me describe the hellish suffering that thousands of Americans have gone through as a consequence of being poisoned by the military's use of depleted uranium munitions. Her comments have been copied below for the benefit of the public.

September 28, 2011

DU – Civilian Contractors

FROM: Patti Redd

Hi,

After reading this: <http://www.bollyn.com/dustin-brim-how-du-kills-us-soldiers> – the light began to dawn in my heart and head. My husband and I were in charge of rolling stock coming onto the Kwajalein Atoll 13 years ago that had been bought very cheap by the Army for either depo or re-furb from the Gulf War to use on the atolls in the Marshall Islands. We were employees of R.....n (company name removed on request for fear of retribution) – and as civilian contractors, we were thrilled to have a jobs in the Pacific -- on off-days we scuba dived and enjoyed the various islands in the region.

Our jobs were – I was the custodian of all rolling stock in the region and my husband was the equipment inspector.

At work we were more exposed (my husband Richard, in particular) to this uranium and tungsten-poisoned pieces of junk left over from the Gulf War than any other employees. The Army managed a quick and clever move with much of the equipment that was poisoning over there – they simply put it on ships and shipped it to out of the way bases away from CONUS for either destruction, which means we just threw it in the ocean around the Marshall Islands or our mechanics worked on the equipment to make it usable for contractors and military personnel at these bases.

No notice of the dangers. No protection in any way. No nothing. We were poisoned.

Today we are in the process of a slow death of gastro distress, having treatment only with palliative care with tincture of opium and pain killers. The doctors are puzzled and after spending every dime we have on UCLA specialists, etc., we are back in Clark County, Nevada with our family doctor who prescribes the only thing she can: pain killers. We are dying and we know it.

The article referenced above struck such a serious chord in my heart. It's heart breaking what has happened and is still happening to those troops in the military who haven't got a chance in hell of survival. DU is the new scourge of the human race. And, NO ONE IS DOING ANYTHING ABOUT IT. It's sick and the system is sick. As Henry Kissinger was once quoted, "the military are just human fodder."

If I thought you knew of something that could help us, I would ask, but I know better. We haven't much future left. And, there is no one who will help.

Take care – please spread the word. If you need help, let me know. Thanks so much.

Patti Redd

* * * * *

September 29, 2011

Re: DU – Civilian Contractors

Dear Christopher,

Thank you for calling me yesterday. It felt good to hear a voice behind what I have read on the Internet. However, after reading what you and your family have been going through, it hardly seems right to ask YOU for help...

Over the past several years my husband and I have feared for our sanity because of simply not believing what the government, what I used to believe was MY government, is doing. While I am afraid our physical struggle is coming to an end soon, I want to get the word out, I want to have an understanding of "WHY," and I just wish for some kind of peace of mind. The physical pain is sometimes transcended by the emotional and mental pain of losing all faith in what I was brought up to believe is right and wrong.

There are several stories you have written that have me choked with tears and sorrow. I realize that "this isn't Kansas anymore." The truth is stranger than fiction – we are personal living proof of that.

Take care, and please keep on with your work.

Sincerely,

Patti Redd

* * * * *

August 31, 2012

We spoke on the telephone about 1 year ago. At that time both my husband and I had been told by our doctor that our fecal matter testing had come back showing U-238 and Tungsten poisoning "literally off the charts." Depleted uranium is a dirty secret utilized by numerous countries, and we were unfortunately caught in the web when working for a military contractor on several US bases.

Since March 2009, my weight has dropped from a healthy 158 to 85 pounds and my husband has lost about 25 pounds and is still losing. DU and Tungsten have literally totaled our gastro systems. Since talking to you about a year ago, we are now on Social Security Disability because of the disastrous effects of the poisoning. We believe that SSD was awarded to us immediately – basically to encourage us to shut up. When

filing for this assistance in the USA, very few claims are awarded immediately -- we were; and without a physician's definitive diagnosis. Hmmmmm.

Believe me, there is nothing "depleted" about depleted uranium. It can take down completely healthy people 10 years after exposure. We believe that the mainstream media is deliberately staying away from the subject. It all reminds me of "Agent Orange" and the government denials of that for so many years.

I wouldn't wish this horrible poisoning on my worst enemy, but our government has done just that, and citizens and troops have been included in the poisoning. What will it take for our governments to admit to what they are doing, stop doing it, and help those of us who are dying from U-238?

* * * * *

September 1, 2012

Good afternoon Christopher,

I don't have very good photos, but will send you a few of what I have – the before and after (probably tomorrow). The poisoning is internal – not external; at least at this point in time.

We've talked it over, and decided to agree to allow the use of our names. Reason: We have nothing to hide. There's no reason to hide behind a curtain. We're dying and have absolutely nothing to lose.

We went from successful business managers to cripples because of U-238 and Tungsten poisoning. The poisoning was literally sitting in our bodies (probably in our blood marrow) waiting for something to set the poisons into action from exposure about 12 years prior when we were working as civilian employees on military bases out of country (USA).

What we had worked hard to achieve – a beautiful home, good jobs (part ownership), and a happy life has now disintegrated to living in an RV on a lot in the middle of the desert for \$100.00 a month rent because that is all we can afford. This has been a frightening and humbling experience. We are literally just waiting to die. Much of our story I have posted on my blog on WordPress entitled "Die with Dignity".

Drugs we take include tincture of Opium, Nucynta, Iomitol, Lortab, Butalb-Apap, Fentanyl patches for pain, and many more prescriptions to keep us walking. Quality of life? Not anymore. We are extremely lucky to have a medical insurance plan, because without it, we would be dead within days.

I see the babies both here and overseas being born with such horrific disabilities that it just breaks our hearts. As a country, and as people, we should be ashamed and alarmed. Instead, we sit back and allow the media to lull us to sleep and "dumb us down." It's frightening.

Our troops are returning from duty in Afghanistan and Iraq bringing back the poisons of DU AND Tungsten...in turn poisoning innocent wives and family members with the poisons that they have in their bodies. This is a crime – – and illegal.

When will Americans stop, listen, and rebel against this evil? Will we have to take it to the streets? Is that what it will take? I used to be proud to be an American. Today I am ashamed.

Our doctors tell us that we will most likely die of some type of cancer as a result of the uranium and tungsten poisoning that is just eating away at our organs.

What does it take for this to stop? Or, will it ever? This isn't an "oops." It's a crime.

Thank you for trying to make a difference. We only hope that your message will get through. Take this bull by the horns and do it. You have an audience and a lot of guts.

Dig deep!

Sincerely,

Patti

* * * * *

September 2, 2012

Good morning,

Here are two pictures of me – one was taken when in 2007 and the other one was taken yesterday (2012).



Patti Redd in 2007



Patti Redd in 2012

My weight started out at 158 and today I weigh 85 pounds. Both of us continue to rapidly lose weight although we take tincture of opium to slow down the "gut" so that we are able to absorb some nutrients. Unfortunately the effectiveness of the drugs is not as good as it was three years ago. Eventually none of the drugs will keep us from the explosive diarrhea and vomiting, and that's starting to happen already.

Although we have gone to over 8 specialists (including UCLA-Santa Monica), the only answer they have found possible is "heavy metal poisoning." We have tried chelation, but that will not work with tungsten and U-238 because these poisons are simply too heavy for effective chelation.

It's terribly difficult to accept dying like this. What will it take to make it stop? It's on record that it's illegal, yet the countries continue to unleash this unforgiveable poison for us to breathe and ingest.

Thank you for anything you can do to try to get the word out to your readers about these military crimes.

Sincerely,

Patti Redd

Richard and Patti Redd – Quartzsite, Arizona

<http://www.diewithdignity.wordpress.com>

<http://www.pattiredd.com>

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How Depleted Uranium Kills U.S. Soldiers – The Tragedy of Dustin Brim

January 26, 2006

The widespread use of depleted uranium weapons in Iraq has led to a much higher death rate among U.S. military personnel than the Pentagon is willing to admit. The tragedy of Dustin Brim is the untold story of one such casualty.

ORMOND BEACH, Florida – An alarmingly high percentage of U.S. military personnel who have served in Iraq have been afflicted by a variety of health problems commonly known as Gulf War Syndrome. Exposure to uranium spread through the use of depleted uranium (DU) weapons is thought to be the primary cause of the high rate of chronic ailments and mortality among Gulf War vets.

One of the first published researchers of Gulf War Syndrome, Dr. András Korényi-Both told me in 2004 that nearly 30 percent of Gulf War veterans from the first invasion of Iraq were afflicted with chronic health problems, a disability rate 5 times that of the Viet Nam War.

While initial casualties from the first U.S. invasion of Iraq were light, long-term casualties from the 1991 war ultimately exceeded 30 percent, according to Terrell E. Arnold, former Chairman of the Department of International Studies at the National War College. The long-term casualty rate from the current war in Iraq, Arnold says, is likely to be much higher.

"Gulf War II is and has been a far more hairy experience," Arnold wrote. "Fighting has been heavier and much more prolonged. Many tons more of depleted uranium weapons have been used, along with other toxic devices. Thus, a long term casualty rate for American forces of 40 to 50 percent appears realistic."

Indeed, as I discovered in 2004, 40 percent of the soldiers in one unit were found to have malignant cancerous growths when they returned from a tour of a year and a few months in Iraq.

András Korényi-Both said the unit, which his son belonged to, had recently returned from Iraq, where it had taken part in the initial assault on Baghdad. In the unit of 20 soldiers, 8 men were found to have "malignant growths" when they returned to the U.S., he said.

Official statistics of killed and wounded from the 15-year long war against Iraq do not reflect the veterans whose service related injuries only become apparent after they return from Iraq. The official death rate of those killed and wounded in Iraq does not include these vets, many of whom suffer slow and painful deaths as a direct result of their service. Dustin Brim was one of them.

"In the end, will we be able to say that the outcome was worth 60-70,000 damaged, distorted or destroyed American lives, to say nothing of the effects on their families and communities?" Arnold asks in his article "Seeing Our Way Out of Iraq."

As I listened to Lori Brim, a single mother who lost her 22-year-old son in the war in Iraq, where he served as an U.S. Army mechanic, to ask whether she thought the outcome was worth her sacrifice never even entered my mind. The depth of her tragedy made such a question seem cruel and absurd.

Lori lost Dustin, her only child, when he died at Walter Reed Hospital in Washington, D.C. on September 24, 2004, after 6 months of fighting what was eventually diagnosed as Non-Hodgkins Diffuse Large Cell B Type Lymphoma. When Lori had asked the doctors how her young, healthy and strong son had contracted cancer all they would say was "bad luck."

Her case worker and nurses at the hospital were more forthcoming with information. At different times during the six months nurses would take Lori aside and urge her to do some research on DU. The nurses' comments were "off the record," Lori said.

Asked whose idea it was for Dustin, a 20-year old from Daytona Beach with a passion for cars, to join the army in the summer of 2002, Lori said, "It was mine." Dustin had not wanted to join the army, his mother said.

But Dustin was never meant to be in a war zone, she added. The U.S. Army recruiter had promised her, that as her only child, he would not be sent to war.

As a single mother, Lori had approached an army recruiter out of concern for the well-being of her son. Although neither she nor Dustin's father have military backgrounds, Lori thought the army would be good for her son by giving him some needed discipline and direction.

Mechanically inclined, Dustin became an army mechanic, an E-4 Specialist serving in the 1st Maintenance Company under the 541st Maintenance Battalion from Fort Riley, Kansas, and was deployed to Iraq in August 2003.

Dustin's work in Iraq involved working on disabled army vehicles, including tanks, which his unit repaired and retrieved, or if damaged beyond repair, destroyed with explosives on the spot. Most of these vehicles, having been in the battlefield, would have been heavily laden with DU and other toxins.

Dr. Doug Rokke, former director of the U.S. Army's Depleted Uranium Project, said that mechanics like Dustin are not properly prepared or protected to be working on DU contaminated vehicles. Lori said that her son had not even been equipped with a pair of gloves, not to speak of a mask or protective garb. The army's failure to inform and instruct its personnel about the dangers of DU exposure is one of Dr. Rokke's main concerns.

At Christmas 2003, Dustin surprised his parents with an unexpected visit after only 4 months in Iraq. It was last time Lori would see her son in a healthy condition. A photo of Dustin taken in Iraq in February 2004 shows him smiling and strong.

In early March, however, Dustin began to complain of abdominal pains. He went to the doctors on his base 11 times during the month complaining of severe pain and constipation that lasted for weeks. He was sent back to his job and told to "work it out."

During the last two weeks of March, he wrote to his mother telling her that he could not keep anything down and that his pain was so persistent and unbearable he was afraid he would lose focus and let his buddies down.

On March 31st he passed out from pain and breathlessness. His sergeant happened to be with him and took him to the doctors who thought he had gall bladder problems and sent him to the hospital in Baghdad.

The next day, April 1st, was Dustin's 22nd birthday. After being assessed and heavily drugged with morphine, the doctors allowed him to call home to tell his mother that was very ill with cancer.

In Baghdad, the doctors had discovered that Dustin had a huge cancerous tumor on his esophagus, which severely restricted his breathing, a collapsed lung, the loss of a kidney, numerous blood clots and a tumor progressing on his liver.

The doctors could not believe that Dustin had been turned away so many times for medical help and still manage to endure as long as he did in his magnitude of pain while carrying an 80-pound pack on his back, his mother said.

Dustin was flown to the military hospital in Landstuhl, Germany, and then on to Walter Reed Hospital in Washington, D.C.

From April through September, Dustin underwent 6 different types of chemo-therapy. Each therapy seemed to work only for a few days after which the cancer returned with a vengeance. On September 24, 2004, Dustin succumbed to the cancer that had affected every organ in his body except for his heart and brain as the autopsy later revealed.

"I knew from the start that Dustin had been either exposed to something in Iraq or his immune system had been affected by the vaccines they had to take," Lori said. "The doctors would not comment on my thoughts but at the end they agreed they had never seen anything like it."

The nurses, however, told Lori to keep researching DU. "Dustin is not the first and he won't be the last," one nurse told her confidentially.

"The medical profession is the most controlled group in the U.S. in order to protect the nuclear weapons and nuclear power programs," Lauren Moret, a Berkeley-based radiation expert said about the silence of the doctors. The gagging of medical professionals has been achieved through a piece of legislation called the Health Insurance Portability and Accountability Act of 1996 (HIPAA), under which a doctor or nurse can be fined and imprisoned for disclosing health information to another person, even a family member.

"The story of Dustin Brim is just one more avoidable tragedy of our insane use of uranium munitions," Rokke said.

"When I lost Dustin, I lost myself," Lori said. "This is something that should not have happened."

"There is something going on but no one wants to talk about it on the record. I am sharing my son's story with you in the hope that perhaps it will make a difference."



Dustin Brim, 21, of Daytona Beach, Florida, in Iraq in February 2004. Within two months of this photo, Dustin would be severely afflicted with massive cancerous tumors that would prevent him from breathing and eating normally.



Within seven months Dustin would succumb to lymphoma at Walter Reed Hospital, age 22, an unnecessary and tragic death from depleted uranium poisoning.

Dr. Doug Rokke, former director of the U.S. Army's Depleted Uranium Project, is pushing for the Army to comply with its own regulations on DU. One of the key points he makes is that U.S. military personnel are not informed or protected from the dangers of DU exposure.

The photo below shows how Dustin Brim and his fellow soldiers worked with contaminated combat vehicles without a stitch of protection. Working with DU-laden vehicles without having "moon-suit" protective garb is certain to cause delayed casualties and long-term health problems.

As Dustin lay in Walter Reed Hospital dying of cancer, a nurse told Mrs. Brim to research depleted uranium effects on human health. "He isn't the first and he won't be the last," she told his mother.



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See also:

- [Depleted Uranium Blamed for Cancer Clusters Among Iraq War Vets](#)

How Depleted Uranium Particles Damage Human Health

January 7, 2005

Depleted uranium weapons, and the untold misery they wreak on mankind, are taboo subjects in the mainstream media. This exclusive report should break the media embargo imposed on the American people.

Despite being a grossly under-reported subject in the mainstream, there is intense public interest in depleted uranium (DU) and the damage it inflicts on humankind and the environment.

While this writer has been actively investigating DU weapons and how they contribute to Gulf War Syndrome, the corporate-controlled press ignores the illegal use of DU and its long-lasting effects on

the health of veterans and the public.

In August 2004, my ground-breaking four-part series on DU weapons and the long-term health risks they pose to soldiers and civilians alike was published in a Washington, D.C. based newspaper. Information provided to me by experts and scientists, and the articles that were published thereafter, have increased public awareness of how exposure to small particles of DU can severely affect human health.

Leuren Moret, a Berkeley-based geo-scientist with expertise in atmospheric dust, corresponds with me on DU issues. Recently Moret provided a copy of her letters to a British radiation biologist, Dr. Chris Busby, about how nanometer size particles—less than one-tenth of a micron and smaller—of DU once inhaled or absorbed into the body, can cause long-term damage to one's health.

Busby is one of the founders of Green Audit, a British organization that monitors companies "whose activities might threaten the environment and health of citizens."

Moret's writings were meant to assist Busby in a legal case being heard in the High Court in London where a former defense worker, Richard David, 49, is suing Normal Air Garrett, Ltd., an aircraft parts company now owned by Honeywell Aerospace, claiming exposure to DU on the job has made his life a "living hell."

David worked as a component fitter on fighter planes and bombers but had to quit due to health problems. He says he developed a cough within weeks of starting work.

Today, David suffers from a variety of symptoms like those known as Gulf War Syndrome, including respiratory and kidney problems, bowel conditions and painful joints. Medical tests reveal mutations to his DNA and damage to his chromosomes, which, he says, could only have been caused by ionizing radiation. He has also been diagnosed with a terminal lung condition.

Honeywell denies DU was ever used at the plant in Yeovil, Somerset, where David worked for 10 years until 1995. David claims that DU's existence at the plant was denied because it is an official secret.

David has asked the High Court for more time to gather evidence. The hearing is due to resume in April. "I don't have any legal representation," David said, "so I am representing myself. It is a real David versus Goliath case.

"I am confident I will win. I hope to set a precedent for other cases of people who have suffered from the effects of depleted uranium," he said.

Moret's letters on the particle effect of DU is based on research done by Marion Fulk, a nuclear physical chemist and former scientist with the Manhattan Project and the National Laboratory at Livermore, Calif. Fulk, who has developed a "particle theory" about how DU nano-particles affect human DNA, donates his time and expertise to help bring information about DU to the public.

Asked about Fulk's particle theory, Busby said it is "quite sound."

"DU is much more dangerous than they say," Busby added. "I've always said that it contributes

significantly to Gulf War Syndrome.”

When Moret’s correspondence to Dr. Busby was posted on the Internet over the New Year’s holiday under the title “How Depleted Uranium Weapons Are Killing Our Troops,” some 6,000 people read the letter in the first two days. The following Monday, a producer from BBC’s Panorama program contacted Moret to arrange an interview.

If the BBC follows up with an investigation on the health effects of DU, it may be hard for the U.S. media to maintain their cover-up. More than 500,000 “Gulf War Era” vets currently receive disability compensation, many of them for a variety of symptoms generally referred to as Gulf War Syndrome. Experts blame DU for many of these symptoms.

“The numbers are overwhelming, but the potential horrors only get worse,” Robert C. Koehler of the Chicago-based Tribune Media Services wrote in an article about DU weapons entitled “Silent Genocide.”

“DU dust does more than wreak havoc on the immune systems of those who breathe it or touch it; the substance also alters one’s genetic code,” Koehler wrote. “The Pentagon’s response to such charges is denial, denial, denial. And the American media is its moral co-conspirator.”

U.S. GOVERNMENT KNOWS

The U.S. government has known for at least 20 years that DU weapons produce clouds of poison gas on impact. These clouds of aerosolized DU are laden with billions of toxic sub-micron sized particles. A 1984 Department of Energy conference on nuclear airborne waste reported that tests of DU anti-tank missiles showed that at least 31 percent of the mass of a DU penetrator is converted to nano-particles on impact. In larger bombs the percentage of aerosolized DU increases to nearly 100 percent, Fulk told me.

DU is harmful in three ways, according to Fulk: “Chemical toxicity, radiological toxicity and particle toxicity.”

Particles in the nano-meter (one billionth of a meter) range are a “new breed of cat,” Moret wrote. Because the size of the nano-particles allows them to pass freely throughout the organism and into the nucleus of its cells, exposure to nano-particles causes different symptoms than exposure to larger particles of the same substance.

Internalized DU particles, Fulk said, act as “a non-specific catalyst” in both “nuclear and non-nuclear” ways. This means that the uranium particle can affect human DNA and RNA because of both its chemical and radiological properties. This is why internalized DU particles cause “many, many diseases,” Fulk said.

Asked if this is how DU causes severe birth defects, Fulk said, “Yes.”

MILITARY AWARE

The military is aware of DU’s harmful effects on the human genetic code. A 2001 study of DU’s effect on DNA done by Dr. Alexandra C. Miller for the Armed Forces Radiobiology Research Institute in

Bethesda, Md., indicates that DU's chemical instability causes 1 million times more genetic damage than would be expected from its radiation effect alone, Moret wrote.

Dr. Miller requested that questions be sent in writing and copied to a military spokesman. She did tell me that it should be noted that her studies showing that DU is "neoplastically transforming and genotoxic" are based on in vitro cellular research.

Studies have shown that inhaled nano-particles are far more toxic than micro-sized particles of the same basic chemical composition. British toxicopathologist Vyvyan Howard has reported that the increased toxicity of the nano-particle is due to its size.

For example, when mice were exposed to virus-size particles of Teflon (0.13 microns) in a University of Rochester study, there were no ill effects. But when mice were exposed to nano-particles of Teflon for 15 minutes, nearly all the mice died within 4 hours.

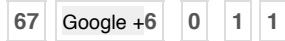
"Exposure pathways for depleted uranium can be through the skin, by inhalation, and ingestion," Moret wrote. "Nano-particles have high mobility and can easily enter the body. Inhalation of nano-particles of depleted uranium is the most hazardous exposure, because the particles pass through the lung-blood barrier directly into the blood.

"When inhaled through the nose, nano-particles can cross the olfactory bulb directly into the brain through the blood brain barrier, where they migrate all through the brain," she wrote. "Many Gulf era soldiers exposed to depleted uranium have been diagnosed with brain tumors, brain damage and impaired thought processes. Uranium can interfere with the mitochondria, which provide energy for the nerve processes, and transmittal of the nerve signal across synapses in the brain.

"Damage to the mitochondria, which provide all energy to the cells and nerves, can cause chronic fatigue syndrome, Lou Gehrig's disease, Parkinson's disease and Hodgkin's disease."



Marion Fulk (left) a nuclear physical chemist and former scientist with the Manhattan Project and the



Pentagon Suppresses Truth about Dangers of Depleted Uranium

August 31, 2004

Poisonous Uranium Munitions Threaten Global Health

The use of weapons containing uranium violates existing laws and customs of war and “constitutes a war crime or crime against humanity,” according to a leading U.S. expert on humanitarian law.

Karen Parker, a San Francisco-based expert in armed conflict law, told American Free Press that the use of radioactive uranium weapons violates the Hague and Geneva Conventions as well as the Conventional Weapons Convention of 1980.

Although no treaty specifically bans DU weapons, they are illegal “de facto and de jure,” Parker said. However, a class action lawsuit by victims of DU weapons will probably be required for a court to ban their use, she said.

‘ILLEGAL FOR ALL COUNTRIES’

“A weapon made illegal only because there is a specific treaty banning it is only illegal for countries that ratify such a treaty,” Parker wrote in a paper, “The Illegality of DU Weaponry,” presented at the International Uranium Weapons Conference in Hamburg, Germany last October. However, “a weapon that is illegal by operation of existing law is illegal for all countries.”

Parker, a delegate to the UN Commission on Human Rights since 1982, provides legal advice to the UN on DU weapons and other matters of humanitarian law.

“DU weaponry cannot possibly be legal in light of existing law,” Parker said.

“In evaluating whether a particular weapon is legal or illegal when there is not a specific treaty, the whole of humanitarian law must be consulted,” Parker wrote.

According to humanitarian law, the illegality of DU weapons is based on four criteria:

The first is the “territorial” test. Weapons may only be used in the legal field of battle. Weapons may not have an adverse effect off the legal field of battle.

The second is the “temporal” test, meaning that weapons may only be used for the duration of an armed conflict. A weapon that continues to act after the war violates this criterion.

The territorial and temporal criteria are meant to prevent weapons from being “indiscriminate” in their effect.

The third rule is that a weapon cannot be unduly inhumane. The Hague Convention of 1907 prohibits “poison or poisoned weapons.” Because DU weapons are radioactive and chemically toxic, as the military knows, they fit the definition of poisonous weapons banned under the Hague Convention.

WHAT THE MILITARY KNOWS

The Defense Department is well aware of the toxic effects of DU. In an official presentation by U.S. Army Reserve Col. J. Edgar Wakayama at Fort Belvoir, Va. on Aug. 20, 2002, the dangers of exposure to DU were clearly spelled out:

“Inhalation exposure has a major effect on the lungs and thoracic lymph nodes,” Wakayama read from a slide. “The alpha particle taken inside the body in large doses is hazardous, producing cell damage and cancer. Lung cancer is well documented,” he noted.

“Urine samples containing uranium are mutagenic [capable of producing mutation]” and “the cultured human stem bone cell line with DU also transformed the cells to become carcinogenic,” Wakayama read.

DU deposited in the bone causes DNA damage because of the effects of the alpha particles, Wakayama stressed. One gram of DU emits 12,000 high-energy alpha particles per second.

The fourth rule for weapons, the “environmental” test, says that weapons cannot have an unduly negative effect on the natural environment.

Wakayama advised, “Heavily contaminated soil should be removed if the area is to be populated with civilians.”

Wakayama described the dangers to children playing in contaminated soil and the leaching of DU into local water and food supplies.

DU FAILS ALL LEGAL CRITERIA

DU weaponry fails all four tests, Parker says. Because it cannot be contained to the battlefield, it fails the territorial test. Airborne DU particles are carried far from the battlefield affecting distant civilian populations and neighboring countries.

Because the uranium dispersed on the ground and in the air cannot be “turned off” when the war is over, DU fails the temporal test.

“The airborne particles have a half-life of billions of years and have the potential to keep killing . . . long after the war is over,” Parker wrote.

“The status of DU as nuclear, radiological, poison or conventional does not change its illegality. When the weapons test is applied to DU weaponry, it fails,” she concluded.

DU weapons fail the humaneness test because of how they kill, Parker says, “by cancer, kidney disease etc, long after the hostilities are over.

“DU is inhumane because it can cause birth defects such as cranial facial anomalies, missing limbs, grossly deformed and non-viable infants and the like, thus affecting children . . . born after the war is over,” Parker said.

“The teratogenic [interfering with normal embryonic development] nature of DU weapons and the possible burdening of the gene pool of future generations raise the possibility that the use of DU weaponry is genocide,” she wrote. “Willfully causing great suffering or serious injury to body or health” of civilians constitutes a grave breach of the fourth Geneva Convention, and this is “exactly what DU weapons do.”

Finally, because DU weapons cannot be used without unduly damaging the natural environment, they fail the fourth rule for weapons, the environmental test.

“No available technology can significantly change the chemical and radiological toxicity of DU,” the Army Environmental Policy Institute reported to Congress in 1994. “These are intrinsic properties of uranium.”

“Regarding environmental damages, users of these weapons are obligated to carry out an effective cleanup,” Parker wrote. “The cost of legal claims and environmental cleanup for the gulf wars alone could be staggering.”

“Use of DU weaponry necessarily violates the ‘grave breach’ provision of the Geneva Conventions, and hence its use constitutes a war crime or crime against humanity,” Parker concluded.

Questions regarding the legality of DU weapons were sent in writing to the Pentagon's appointed spokesman on DU matters, James Turner.

Turner told AFP that he was “not qualified” to answer such questions.

By press time the Pentagon had not responded to repeated requests for information.

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Depleted Uranium Stricken Vets Denied Care

August 20, 2004

Pentagon Hides DU Dangers to Deny Medical Care to Vets

Far from the radioactive battlefields of Iraq and Afghanistan , another war is being waged. This war, over the use of depleted uranium (DU) weapons, is being fought between the military top brass and the men who understand the dangers of DU: former military doctors and nuclear scientists.

This war is for the truth about uranium weapons, and the consequences of their use, and has been waged for more than 13 years—since the U.S. government first used DU weapons against Iraq . Most Americans, however, are unaware of this historic struggle, because the Pentagon has used its power to prevent information about DU from reaching the public.

John Hanchette, editor of USA Today from 1991 to 2001, in a recent interview with anti-DU activist Leuren Moret, said he had written several news stories about the effects of DU on gulf wars veterans. Every time he was ready to publish a story about the devastating illnesses afflicting soldiers, however, the Pentagon called USA Today and pressured him not to publish the story. Hanchette was eventually replaced as editor and now teaches journalism to college students.

Dr. Doug Rokke, 37-year Army veteran and former director of the Army's Depleted Uranium Project, has become an outspoken "warrior for peace" in the war against DU weapons. Rokke is fighting for medical care for all people exposed to DU: active soldiers, veterans and civilians, including Iraqis, and for "remediation" or cleansing of all DU-contaminated land.

"Anyone who demands medical care and environmental remediation faces ongoing and blatant retaliation," Rokke told AFP. "Anybody who speaks up—their career ends."

During Gulf War I, Rokke was theater health physicist with the 12th Preventive Medicine Command professional staff and served on three special operations teams. Rokke and members of his teams were exposed to large amounts of uranium during recovery of U.S. tanks and armored vehicles mistakenly hit by DU weapons.

Today, Rokke is fighting to get the Pentagon to abide by its regulations regarding care for individuals exposed to uranium and remediation of contaminated areas.

The military records of one of Rokke's comrades, who suffers from the effects of DU exposure, have been completely "gutted" from Army archives, Rokke told AFP.

"They [defense officials] willfully ignore existing Department of Defense directives that require prompt and effective medical care be provided to 'all' exposed individuals," Rokke says.

Rokke points to a U.S. Army Medical Command memo dated April 29, 2004, from Lt. Gen. James B. Peake about medical management of Army personnel exposed to DU. The memo, which says "all personnel with actual or potential exposures to DU will be identified, assessed, treated (if needed), and assigned a potential exposure level (I, II, or III)," reiterates the U.S. Army regulations originally written by Rokke in 1991, he said.

"A radio bioassay has to be done within a few days of exposure," Rokke said. "This means nasal and pharyngeal swabs being taken and 24-hour urine and fecal analysis.

"Today," Rokke writes, "although medical problems continue to develop, medical care is denied or delayed for all uranium-exposed casualties while Defense Department and British Ministry of Defense officials continue to deny any correlation between uranium exposure and adverse health and environmental effects."

Rokke said the individuals at the Department of Defense are engaged in a "criminal" conspiracy to deny the toxicity of DU weapons. "The lies by senior Defense Department officials are designed to sustain use of uranium munitions and avoid liability for adverse health and environmental effects," he said. According to Rokke, a recent Gulf War Review reported that only 262 vets had been treated for DU poisoning through September 2003.

The military's strategy of lies and concealment about DU began in March 1991, shortly after the first widespread combat use of DU weapons by the U.S. government in Iraq, Rokke said.

On March 1, 1991, Lt. Col. Michael V. Ziehm of Los Alamos National Lab wrote a memo about the effectiveness of DU penetrators. The "future existence" of DU weapons should be ensured by active "proponency" by the Department of Defense, Ziehm wrote.

"If proponency is not garnered, it is possible that we stand to lose a valuable combat capability," Ziehm wrote. "I believe we should keep this sensitive issue at mind when after-action reports are written."

When American Free Press began this series on DU weapons, the U.S. Army alerted the Centers for Disease Control, an Atlanta-based agency of the Department of Health and Human Services.

"The CDC is going to do a whitewash on DU," Marion Fulk, a former nuclear chemical physicist at Lawrence Livermore Lab, said. Fulk told AFP he had received this information directly from CDC officials.

AFP asked Stephanie C. Creel of the CDC about its position on the toxicity of DU. Creel said the CDC's Agency for Toxic Substances and Disease Registry (ATSDR) on-line "fact sheet" would provide the "most in-depth information" on the subject.

The ATSDR fact sheet: "The radiation damage from exposure to high levels of natural or depleted uranium are [sic] not known to cause cancer."

"No apparent public health hazard," the CDC assessment of Livermore lab, published June 29, said about local exposure levels to tritium, a radioactive isotope of hydrogen, Fulk said.

"It's nonsense," Fulk said. "It's been dumped all around the area. It goes through glass and steel."

Depleted uranium is a misnomer, according to Fulk. Depleted uranium, mostly U-238, is uranium that has had the naturally occurring fissile material, U-235, removed. DU is very radioactive, however. While one gram of U-235 emits 81,000 alpha particles per second, U-238 emits 12,000 per second. These high-energy particles coming from DU particles lodged in the body cause the most damage, according to Fulk and others.

"Depleted uranium dust that is inhaled gets transferred from the lungs to the regional lymph nodes, where they can bombard a small number of cells in their immediate vicinity with intense alpha radiation," said Dr. Asaf Durakovic, former Pentagon expert on DU.

Science Applications International Corp. (SAIC), a defense contractor in San Diego, published an extensive article about the dangers of DU six months before President George H.W. Bush waged war against Iraq in 1991.

"Under combat conditions, the most exposed individuals are probably the ground troops [who] re-enter a battlefield following the exchange of armor-piercing (DU) munitions," SAIC published in its July 1990 magazine.

“Short-term effects of high doses can result in death, while long-term effects of low doses have been implicated in cancer,” SAIC wrote.

AFP submitted written questions to the U.S. Army Medical Command asking how the Army can claim that DU exposure is harmless when military documents have stressed its lethal toxicity.

Mark A. Melanson, of the Army's Center for Health Promotion and Preventive Medicine in Aberdeen , Md. , responded in an email: “The two positions are not opposing. As with all potentially hazardous material, the amount determines the risk.”

Melanson wrote that the Army was complying with its own regulations regarding medical care for DU exposure, saying: “Soldiers are being screened by completing the post deployment health questionnaire upon demobilization. Troops identified as being at potential risk for DU exposure are directed to provide a urine bioassay for analysis.”

Rokke said: “That is too late. Hence they find a way out.”

AFP repeatedly tried to speak to Melanson about the quantity of DU that the Army considered hazardous. He did not return phone calls.

“An individual could [safely] breathe in up to a gram per year every year for 50 years,” Melanson recently told The New York Daily News.

“That's absolutely absurd,” Fulk said. Fulk said the number of alpha particle emissions from a gram of DU lodged in the body over a year would be about the same as one–10th of all the cells in his body.

The inhaled DU particles have a tendency to bind with phosphate in the human body, found in the bones and the DNA. The alpha particle being emitted to the cells nearby “is doing the dirty work,” Fulk said.

Painful breathing and respiratory problems are the first and most common symptoms of DU inhalation, Rokke said. Dr. Janette Sherman told AFP she met a 31-year-old female former soldier at a Maryland veteran's hospital who had recently served in Kuwait . Sherman, a toxicologist, was shocked when the young woman told her that she required a lung transplant.

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Depleted Uranium Blamed for Cancer Clusters Among Iraq War Vets

August 15, 2004

A discovery by that nearly half of the recently returned soldiers in one unit from Iraq have “malignant growths” is “critical evidence,” according to experts, that depleted uranium weapons are responsible for the huge number of disabled Gulf War vets – and damage to their DNA.

A growing number of U.S. military personnel who are serving, or have served, in the Persian Gulf, Iraq , and Afghanistan have become sick and disabled from a variety of symptoms commonly known as Gulf War Syndrome. Depleted uranium (DU) weapons have been blamed for causing many of the symptoms.

“Gulf War vets are coming down with these symptoms at twice the rate of vets from previous conflicts,” said Barbara A. Goodno from the Dept. of Defense’s Deployment Health Support Directorate.

A recent discovery by the author that nearly half the soldiers in one returned unit have malignant growths has provided the scientific community with “critical evidence,” experts say, to help understand exactly how depleted uranium affects humans – and their DNA.

One of the first published researchers of Gulf War Syndrome, Dr. András Korényi–Both said that 27–28 percent of Gulf War veterans have suffered chronic health problems, more than 5 times the rate of Viet Nam vets, and 4 times the rate of Korean War vets.

Korényi–Both said his son had recently returned from Iraq , where he had been part of the initial assault from Kuwait to Baghdad . From his unit of 20 men, 8 now have “malignant growths,” Korényi–Both said.

Dr. Korényi–Both is not an expert on DU, but has written extensively about how the fine desert sand blowing around Iraq and the Arabian Peninsula provides a ideal vehicle for toxins, increasing the range and effect of biological and chemical agents, such as DU, that attach themselves to the particles of sand.

Korényi–Both described how, during the 1991 Gulf War, he and others had inhaled large quantities of sand dust that could have been laden with chemical or biological agents. The sand “destroyed our immune systems,” he said.

FULK'S THEORY

Marion Fulk, a former nuclear chemical physicist at Lawrence Livermore lab, is investigating how DU affects the human body. Fulk said that 8 malignancies out of 20, in 16 months, “is spectacular – and of serious concern.”

The high rate of malignancies found in this unit appears to have been caused by exposure to DU weapons on the battlefield. If DU were found to be the cause, this case would be “critical evidence” of Fulk’s theory on how the DU particulate affects DNA.

Such quick malignancies are caused by the particulate effect of DU, according to Fulk:

When DU (Uranium 238) decays, it transforms into two short-lived and “very hot” isotopes – Thorium 234 and Protactinium 234. As it transforms in the body, the DU particle is firing off faster and faster “bullets” into the DNA, Fulk said, or wherever it is lodged. Because uranium has a natural attraction to phosphorus, however, it is drawn to the phosphate in the DNA.

As the Uranium 238 decays, it releases alpha and beta particles with millions of electron volts. When a DU particle makes this transformation in the human body it releases “huge amounts of energy in the same location doing lots of damage very quickly,” Fulk said.

Thorium 234 has a half-life of 24 days and emits a beta particle of .270 million electron volts as it transforms into Protactinium 234, which has a half-life of less than 7 hours. Protactinium then emits a beta particle of 2.19 million electron volts as it transforms into the more stable Uranium 234.

The chemical binding energy in the molecules of the human cell is less than 10 electron volts. One alpha particle from U-238 is over 4 million electron volts, which is like "nuking a cell."

Leuren Moret, a scientist who is opposed to the use of DU, compared it to sitting in front of a fire and putting a red-hot coal in your mouth. "The nuclear establishment wants us to believe that it is like sitting in front of the fire and warming the whole body evenly – and that no harm is done, but that is not the reality," she said.

"We can expect to see multiple cancers in one person," Moret said. "These multiple unrelated cancers in the same individual have been reported in Yugoslavia and Iraq in families that had no history of any cancer. This is unknown in the previous studies of cancer," she said. "A new phenomenon."

The Pentagon's Goodno questioned Dr. Korényi-Both's report that 8 of 20 recently returned soldiers from one unit had experienced malignant growths. Goodno and Korényi-Both did agree, however, that Iraqi chemical and biological agents had not played a role in the 2003 invasion.

This is significant because three factors have generally been blamed for causing Gulf War Syndrome: Iraqi chemical and biological weapons, the cocktail of vaccinations given to coalition soldiers, and depleted uranium. The absence of any detectable chemical or biological agents during the 2003 invasion of Iraq reduces the number of potential factors for the malignancies in the veterans to pre-war vaccinations and DU.

Statistics published in Encyclopedia Britannica's 2003 Almanac indicate that 325,000 Gulf War vets were receiving compensation for service-related disabilities in 2000. The almanac lists 580,400 combatants in the Persian Gulf War of 1990-91, yet only 467 U.S. personnel were actually wounded during the conflict. The 325,000 disabled Gulf War vets are equivalent to 56 percent of the number of military personnel "serving in the theater of operation."

Furthermore, in 2000, nine years after the three-week war in Iraq had ended, the number of disabled vets from the Gulf War was increasing yearly by more than 43,000. While the number of disabled vets from previous wars is decreasing by about 35,000 per year, since the "War on Terror" began in 2001, the total number of disabled vets has grown to some 2.5 million.

MORE DISABLED VETS

"More than ever before," Brad Flohr of the Dept. of Veterans Affairs said about the total number of disabled vets. Asked if there are more disabled vets now than even after World War II, Flohr said he believed so.

Terry Jemison of the Dept. of Veterans Affairs said that current statistics indicate that more than half a million veterans of the 14-year-old "Gulf War era" are now receiving disability compensation. During this period, some 7,035 soldiers are reported having been wounded in Iraq .

With 518,739 disabled “Gulf-era veterans” currently receiving disability compensation, according to Jemison, the number of veterans disabled after the war is more than 73 times the total number of wounded, in and out of combat, from the entire 14-year conflict with Iraq.

DEPLETED URANIUM WEAPONS

Last December, Dr. Asaf Durakovic, a nuclear medicine expert who has conducted extensive research on depleted uranium, examined nine soldiers from the 442nd Military Police Company of New York and found that four of the men had absorbed or inhaled depleted uranium (U-238).

Several of the men had traces of another uranium isotope, U-236, which is only produced in a nuclear reaction process. U-236 is a man-made isotope of uranium.

“These men were almost certainly exposed to radioactive weapons on the battlefield,” Durakovic said.

“Due to the current proliferation of DU weaponry, the battlefields of the future will be unlike any battlefields in history,” Durakovic, then Chief of Nuclear Medicine for the Veterans Administration said after the first Gulf War, in which he served.

Since 1991, the U.S. military has used DU in munitions as penetrating rods, which destroy enemy tanks and their occupants, and as armor on U.S. tanks. When DU penetrating rods strike a hard target some of the radioactive and chemically toxic DU is vaporized into ultra-fine particles that are easily inhaled or absorbed through the skin.

According to a survey of 10,051 Gulf War veterans, conducted between 1991 and 1995 by Vic Sylvester and the Operation Desert Shield/Desert Storm Association, 82 percent of veterans reported having entered captured Iraqi vehicles. “This would suggest that 123,000 soldiers have been directly exposed to DU,” Durakovic said.

“Since the effects of contamination by uranium cannot be directed or contained, uranium's chemical and radiological toxicity will create environments that are hostile not only to the health of enemy forces but of one's own forces as well,” Durakovic said.

“Because of the chemical and radiological toxicity of DU, the small number of particles trapped in the lungs, kidneys, and bone greatly increase the risk of cancer and all other illnesses over time,” Durakovic, an expert of internal contamination of radio-isotopes, said.

According to Durakovic, other symptoms associated with DU poisoning are: emotional and mental deterioration, fatigue, loss of bowel and bladder control, and numerous forms of cancer. Such symptoms are increasing showing up in Iraq 's children and among Gulf War veterans and their offspring, he said.

“Although I personally served in Operation Desert Shield as Unit Commander,” Durakovic said, “my expertise of internal contamination was never used because we were never informed of the intended use of DU prior to or during the war.”

“The numbers are overwhelming, but the potential horrors only get worse,” Robert C. Koehler of the Chicago-based Tribune Media Services wrote in his March 25 article on DU weapons, “Silent Genocide.”

“DU dust does more than wreak havoc on the immune systems of those who breathe it or touch it; the substance also alters one's genetic code,” Koehler wrote. “The Pentagon's response to such charges is denial, denial, denial. And the American media is its moral co-conspirator.”

As I reported earlier, the smallest particles of DU, when inhaled, are capable of moving throughout the human body, passing through cell walls and affecting the person's Master Code, according to Fulk, and the “_expression of the DNA.”

Four years after the Gulf War of 1991, Life magazine published a photo-essay entitled “The Tiny Victims of Desert Storm,” which focused on the numerous cases of severe birth defects that had occurred in families of veterans from that war.

Life reported, “Of the 400 sick vets who had already answered [Don Riegle's Senate Banking] committee inquiries, a startling 65 percent reported birth defects or immune-system problems in children conceived after the war.”

I asked the Dept. of Veterans Affairs if they kept records of the birth defects occurring among the families of veterans, and was told they do not.

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Depleted Uranium Weapons – The Real Dirty Bombs

August 6, 2004

Lost in the media circus about the Iraq war, supposedly being fought to prevent a tyrant from obtaining weapons of mass destruction, is the salient fact that the United States and Britain are actively waging chemical and nuclear warfare in Iraq – using depleted uranium munitions.

The corporate-controlled press has failed to inform the public that, in spite of years of UN inspections and numerous international treaties, tons of banned weapons of mass destruction (WMD) – used and unused – remain in Iraq . Indeed, both chemical and radioactive WMD have been – and continue to be used against U.S. and coalition soldiers.

The media silence surrounding these banned WMD, and the horrendous consequences of their use, is due to the simple fact that they are being used by the U.S.-led coalition. They are the new “Silver Bullet” in the U.S. arsenal. They are depleted uranium weapons.

Depleted uranium (DU) weapons were first used during the first Gulf War against Iraq in 1991. The Pentagon estimated that between 315 and 350 tons of DU were fired during the first Gulf War. During the 2003 invasion and current occupation of Iraq, U.S. and British troops have reportedly used more than five times as many DU bombs and shells as the total number used during the 1991 war.

While the use of DU weapons and their effect on human health and the environment are subjects of extreme importance the Pentagon is noticeably reluctant to discuss these weapons. Despite numerous

calls to specific individuals identified as being the appointed spokesmen on the subject, not one would answer their phone during normal business hours for the purpose of this article.

Dr. Doug Rokke, on the other hand, former director of the U.S. Army's Depleted Uranium Project, is very willing to talk about the effects of DU. Rokke was involved in the "clean up" of 34 Abrams tanks and Bradley armored vehicles hit by friendly fire during the 1991 Gulf War. Today he suffers from the ill effects of DU in his body.

Rokke told American Free Press that the Pentagon uses DU weapons because they are the most effective at killing and destroying everything they hit. The highest level of the U.S. and British governments have "totally disregarded the consequences" of the use of DU weapons, Rokke said.

The first Gulf War was the largest friendly fire incident in the history of American warfare, Rokke says. "The majority of the casualties were the result of friendly fire," he told AFP.

DU is used in many forms of ammunition as an armor penetrator because of its extreme weight and density. The uranium used in these missiles and bombs is a by-product of the nuclear enrichment process. Experts say the Department of Energy has 100 million tons of DU and using it in weapons saves the government money on the cost of its disposal.

Rather than disposing of the radioactive waste, it is shaped into penetrator rods used in the billions of rounds being fired in Iraq and Afghanistan. The radioactive waste from the U.S. nuclear weapons industry has, in effect, been forcibly exported and spread in the environments of Iraq, Afghanistan, the former Yugoslavia, Puerto Rico, and elsewhere.

THE REAL "DIRTY BOMBS"

"A flying rod of solid uranium 18-inches long and three-quarters of an inch in diameter," is what becomes of a DU tank round after it is fired, Rokke said. Because Uranium-238 is pyrophoric, meaning it burns on contact with air, DU rounds are burning as they fly.

When the DU penetrator hits an object it breaks up and causes secondary explosions, Rokke said. "It's way beyond a dirty bomb," Rokke said, referring to the terror weapon that uses conventional explosives to spread radioactive material.

Some of the uranium used with DU weapons vaporizes into extremely small particles, which are dispersed into the atmosphere where they remain until they fall to the ground with the rain. As a gas, the chemically toxic and radioactive uranium can easily enter the body through the skin or the lungs and be carried around the world until it falls to earth with the rain.

AFP asked Marion Falk, a retired chemical physicist who built nuclear bombs for more than 20 years at Lawrence Livermore lab, if he thought that DU weapons operate in a similar manner as a dirty bomb. "That's exactly what they are," Falk said. "They fit the description of a dirty bomb in every way."

According to Falk, more than 30 percent of the DU fired from the cannons of U.S. tanks is reduced to particles one-tenth of a micron (one millionth of a meter) in size or smaller on impact.

“The larger the bang” the greater the amount of DU that is dispersed into the atmosphere, Falk said. With the larger missiles and bombs, nearly 100 percent of the DU is reduced to radioactive dust particles of the “micron size” or smaller, he said.

While the Pentagon officially denies the dangers of DU weapons, since at least 1943 the military has been aware of the extreme toxicity of uranium dispersed as a gas. A declassified memo written by James B. Conant and two other physicists working on the U.S. nuclear project during the Second World War, and sent to Brig. Gen. L.R. Groves on October 30, 1943, provides the evidence:

“As a gas warfare instrument the [radioactive] material would be ground into particles of microscopic size to form dust and smoke and distributed by a ground-fired projectile, land vehicles, or aerial bombs,” the 1943 memo reads. “In this form it would be inhaled by personnel. The amount necessary to cause death to a person inhaling the material is extremely small. It has been estimated that one millionth of a gram accumulation in a person's body would be fatal. There are no known methods of treatment for such a casualty.”

The use of radioactive materials “as a terrain contaminant” to “deny terrain to either side except at the expense of exposing personnel to harmful radiations” is also discussed in the Groves memo of 1943.

“Anybody, civilian or soldier, who breathes these particles has a permanent dose, and it's not going to decrease very much over time,” Leonard Dietz, a retired nuclear physicist with 33 years experience told the New York Daily News . “In the long run ... veterans exposed to ceramic uranium oxide have a major problem.”

Inhaled particles of radioactive uranium oxide dust will either lodge in the lungs or travel through the body, depending on their size. The smallest particles can be carried through cell walls and “affect the master code – the __expression of the DNA,” Falk told AFP.

Inhaled DU can “fool around with the keys” and do damage to “practically anything,” Falk said. “It affects the body in so many ways and there are so many different symptoms that they want to give it different names,” Falk said about the wide variety of ailments afflicting Gulf War veterans.

Today, more than one out of every three veterans from the first Gulf War are permanently disabled. Terry Jemison of the Dept. of Veterans Affairs said that of the 592,561 discharged veterans from the 1991 war in Iraq , 179,310 are receiving disability compensation and another 24,763 cases are pending.

The “epigenetic damage” done by DU has resulted in many grossly deformed children born in areas such as southern Iraq where tons of DU have contaminated the environment and local population. An untold number of Americans have also been born with severe birth defects as a result of DU contamination.

The New York Daily News conducted a study on nine recently returned soldiers from the New York National Guard. Four of the nine were found to have “almost certainly” inhaled radioactive dust from exploded DU shells.

Laboratory tests revealed two manmade forms of uranium in urine samples from four of the 9 soldiers. The four soldiers are the first confirmed cases of inhaled DU from the current Iraq war.

"These are amazing results, especially since these soldiers were military police not exposed to the heat of battle," said Dr. Asaf Duracovic, who examined the soldiers and performed the testing. "Other American soldiers who were in combat must have more DU exposure," Duracovic said. Duracovic is a colonel in the Army reserves and served in the 1991 Gulf War.

The test results showing that four of nine New York guardsmen test positive for DU "suggest the potential for more extensive radiation exposure among coalition troops and Iraqi civilians," the Daily News reported.

"A large number of American soldiers [in Iraq] may have had significant exposure to uranium oxide dust," Dr. Thomas Fasey, a pathologist at Mount Sinai Medical Center and an expert on depleted uranium said, "And the health impact is worrisome for the future."

HOTTER THAN HELL

"I'm hotter than hell," Rokke told AFP. The Dept. of Energy tested Rokke in 1994 and found that he was excreting more than 5,000 times the permissible level of depleted uranium. Rokke, however, was not informed of the results until 1996.

As director of the Depleted Uranium Project in 1994-95, Rokke said his task was three fold: determine how to provide medical care for DU victims, how to clean it up, and how to educate and train personnel using DU weapons.

Today, Rokke says that DU cannot be cleaned up and there is no medical care. "Once you're zapped - you're zapped," Rokke said. Among the health problems Rokke is suffering as a result of DU contamination is brittle teeth. He said that he just paid out \$400 for an operation for teeth that have broken off. "The uranium replaces the calcium in your teeth and bones," Rokke said.

"You fight for medical care every day of your life," he said.

"There are over 30,000 casualties from this Iraq war," Rokke said.

The three tasks set out for the Depleted Uranium Project have all failed, Rokke said. He wants to know why medical care is not being provided for all the victims of DU and why the environment is not being cleaned up.

"They have to be held accountable," Rokke said, naming President George W. Bush, Secretary of Defense Donald Rumsfeld, and British prime minister Tony Blair. They chose to use DU weapons and "totally disregarded the consequences.